

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M - 6		9/14/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	S.S.	69134	10-31-00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	11/15/01
2	✓	✓	3/22/02
3	✓	✓	11/14/02
4	✓	✓	3/19/03
5	✓	✓	7/29/03
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33	✓	✓	V V
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35	✓	✓	V V
36	✓	✓	V V
37	✓	✓	V V
38	N	N	
39	N	N	
40	N	N	
41	N	N	
42	N	N	
43	N	N	
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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